DOCUMENT RESUME

ED 111 129 BC 073 443

AUTHOR Richmond, Bert O.; And Others

TITLE Self-Concept of the Mentally Retarded Compared to

Other Pupils of Similar Age.

INSTITUTION Delta State Coll., Cleveland, Miss.; Georgia Univ.,

Athens.

NOTE 12p.

EDRS PRICE MF-\$0.76 HC-\$1.58 Plus Postage

DESCRIPTORS *Educable Mentally Handicapped; Exceptional Child

Research: Intermediate Grades; Mentally Handicapped;

Negroes; *Self Concept; Socioeconomic Influences

ABSTRACT

Compared were the self concepts of 34 educable retarded children (mean age 11 years) with the self concepts of 34 fifth and sixth grade Blacks in an all Black school, 32 fifth and sixth grade Blacks in integrated classrooms, 31 sixth grade whites in an all white rural school, and 31 fifth grade whites in an all white suburban school. Results of scores on the Coopersmith Self-Esteem Inventory indicated that educable retarded Ss and Black Ss in a newly integrated classroom had significantly lower self concept scores than other Ss. Data suggested the need for self concept training in compensatory programs. (CL)



U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
NATIONAL INSTITUTE OF
EDUCATION
THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM
THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS
STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF

Self-Concept of the Mentally Retarded Compared to Other Pupils of Similar Age

> Bert O. Richmond University of Georgia

George Briggs Delta State College

Ernest Bundschuh University of Georgia

The EMR child is expected to demonstrate less academic or intellectual ability than the child in a regular classroom but it is not so clear whether he possesses similar deficits in affective characteristics.

The purpose of this study is to compare the self-concept of children in EMR classes to the self-concept of children in other educational groupings. In order to compare the EMR child with both advantaged and disadvantaged learners the following groups were used: 1) black pupils in an all-black school, 2) black pupils in integrated classrooms, 3) white pupils in an all-white rural school, and 4) white pupils in an all-white suburban school. Results indicated that EMR children and black pupils in a newly integrated classroom have self-concept scores significantly lower than children in other groups. Compensatory programs should plan activities to enhance self-concept as well as academic skills.

SELF-CONCEPT OF THE MENTALLY RETARDED COMPARED TO OTHER PUPILS OF SIMILAR AGE

Much of our concern with mentally retarded youngsters in school centers around their difficulties in learning. In fact, the psychoeducational assessment instruments used in identifying the child's degree of mental retardation are measures both of his learned abilities and his potential for learning. Yet those who work closely with the mentally retarded in classes understand that academic learning is only one aspect of the individual's total capabilities. For example, the educable mentally retarded child may demonstrate physical, social, artistic, or other abilities superior to that of many children in the regular classrooms. Teacher reports indicate the EMR child may excel in almost any area other than academic achievement.

In order to understand and work more effectively with the EMR child, it is necessary to obtain as much information as possible on a complete range of abilities, interests, and achievements. It is important to understand essential differences and similarities between EMR children and other educationally defined groups of children if we are to plan educational programs and experiences wisely.

Educators find it convenient to think in terms of groups of children with reference to their learning potential. The middle-class or upper class child is apt to achieve well whereas the minority group member, the lower socio-economic group child or the mentally retarded pupil does not achieve as well. It is not so clear in the minds of educators whether

children in these groups differ so significantly in personality traits.

It is often surprising to the professional educator, psychologist, social worker or others involved with the mentally retarded for the first time to discover the variety of personality differences among mentally handicapped children. Those who work regularly with the mentally retarded child know that intellectual deficits are not the only unique characteristic of the child. Cromwell (1959) notes that we have ignored research in personality of the mentally retarded and have tended to distinguish them from the general population only on the basis of intelligence variables. In a similar vein, Weiner (1967) questions the traditional ways of evaluating handicapped children and calls for more and different information that is more meaningful. Our focus on the limited intellectual ability of these pupils forces an emphasis on "catch-up" or compensatory activities that connotes inferior education to teacher and pupil alike.

Such a perception of one's activities is not likely to produce feelings of pride or self-esteem. If the child's concept of self is not low to begin with, the repeated failure in academic areas may decrease the level of self-esteem. As Buhler points out (1971) the need for each person to develop an adequate concept of self is a most pressing issue for education and probably the most pressing issue of our times.

There is some evidence to indicate that the self-concept of mentally retarded children can be changed and that such change produces positive results in success in school, (Mann, 1969). It is important that we gain a clearer perspective of the mentally retarded child's perception of self. It is also of interest to note whether the child in a special class or setting



for the mentally retarded holds a different view of himself than those children assigned to other educational groupings. Specifically, how does the mentally retarded child view himself as compared to other advantaged and disadvantaged groups of children in our society. The basic hypothesis of this study, stated in null form, is: There is no significant difference between the expressed self-concept of mentally retarded children and the expressed self-concept of children in other educational groupings.

Some recent research findings raise questions about the validity of attempting to measure the self-concept of mentally retarded children.

(Knight, 1970). A major criticism of self-concept measures, according to the preceding author, is their reliance on reading ability which places the mentally retarded child at a disadvantage. However, several other authors, (Guthrie, 1961; Ringness, 1961; and Meyerowitz, 1962) indicate that the mentally retarded can respond to inventories structured to assess self-concept and urge that reliable results are obtainable as well as useful to our understanding of the mentally retarded.

There are many instruments that purport to measure self-concept and most require the individual to respond verbally to statements he believes descriptive of self. The authors chose the Coopersmith Self-Esteem Inventory (SEI) an instrument that has been used widely to measure the self-concept of upper elementary age children. (Coopersmith, 1967). This instrument asks the child to respond to statements describing his feelings about self in home, school, peer, and parental relationships and uses language usually meaningful to elementary age children.



Procedure

Children are grouped in educational settings for a variety of reasons and it would be possible to examine the characteristics of children in an almost infinite variety of groupings. It is the intent of this study to look only at five such groupings: A) Pupils in separate classes for the mentally retarded, B) Black pupils in an all-black school, C) Black pupils in an integrated school during the first year of racial integration, D) White pupils in an all white, rural area school, E) White pupils in an all-white suburban area school. It was assumed that intelligence and socio-economic factors would differ for these five groups so only age was controlled. The mean chronological age for each group was between 11-0 and 11-11. There were approximately equal numbers of males and females in each group.

Croup A consists of 34 children classified as educably mentally retarded with intelligence scores between 50 and 80 on the Stanford-Binet or Wechsler Intelligence Scales. All attend classes for the mentally handicapped in a separate building that is maintained through federal, state, and local funds. Children who live near the facility attend on a day-basis whereas those at a greater distance are assigned on a residential basis.

All children are expected to return to their own community schools within a one to two year period. These children receive a wide range of social work, psychological, recreational, and other services. The average age of this group of 34 EMR pupils is approximately 11 years.

Group B consists of all the black 5th and 6th grade pupils in two classes in an all-black school. These 34 pupils were in the separate classes of a small village prior to effective integration of schools in the south-



eastern portion of the U.S. The average age of this group is approximately 11 years.

Group C consists of 32 black pupils who were assigned to 5th and 6th grade classes in an integrated school setting. In each class, black pupils constituted about one-half of the class members.

Group D consists of 31 6th grade white pupils in an all-white rural school. As with many schools in the rural, southeastern portion of the U. S., these pupils are lower to low-middle socio-economic status.

Group E consists of 31 5th grade white pupils in an all white suburban school. The majority of these pupils are of average or better socioeconomic status and the children of business and professional people.

Pupils were selected because of their mean age of approximately 11 and all lived within a 100 mile radius of each other in a southeastern state. Data were collected about the third month of school at a time when racial integration in the schools had not been completely effected in this section of the state. This made it possible to compare differential perceptions of black pupils. No effort was made to control for intelligence but pupils in the last four groups were assigned to a regular group classroom and are assumed to have a mean intelligence score in the average range. The intelligence score limits for the mentally retarded children are indicated.

The SEI was group administered to each of groups B, C, D, & E. Each item was presented orally by the examiner and each child had a copy of the instrument on which to record his self-perceptions. Questions about the meaning of words in the instrument were minimal from these four groups but

were answered by the examiner when raised. In administering the SEI to the EMR children, the examiner worked individually with each child or with a small group of two or three pupils in order to monitor more effectively the pupil's understanding and responses to items. The examiner followed the same administration procedure as with the groups of other children but was prepared to devote more time to getting the EMR child to comprehend. Six of the 40 EMR children gave incomplete responses to the SEI so only the 34 who completed the instrument were included in this study.

SEI data were obtained from each group of pupils and analyzed by ANOVA to determine significant differences among the groups. Results of ANOVA are as follows:

Sum Squares Total 31697.2196

Degrees of freedom 4

Mean Sum Within 146.9613

F-ratio 14.6710 p .01

Table 1 contains the means and standard deviations for each group.

Table 1 Group means and SD's on SEI

Mean	Group A	Group B	Group C	Group D	Group E
	54.9	65.6	52.3	62.8	72.5
Standard Deviation	9.4	9.1	6.3	17.9	14.8

The differences in SEI for pupils in the five groups are rather obvious from inspection of the data. The EMR pupils are similar to black pupils in newly integrated classes. With considerably higher scores in self-con-



cept, are the white pupils in all-white, rural classrooms and the black pupils in all black classrooms. The group with the highest level of self-esteem is the white, middle-class pupil in the all-white suburban classroom.

These findings suggest that children in EMR classes, in rural areas and those from minority groups have considerably lower estimates of self worth than more advantaged children in middle class schools. Not only do these children seem to perform less well academically but they also reveal deficiencies in self-esteem.

An effective educational program for pupils in each of these relatively more disadvantaged groups should provide experiences to enhance their concepts of self as well as to upgrade academic skills.

An interesting, although not totally unexpected finding of this study, is that black pupils in an integrated school expressed lower concept of self than black pupils in all black schools. The black pupils had been placed in integrated classrooms within three months of the date of this study so they had had little time to adjust to a new and perhaps threatening social milieu. It is likely that this concept of self will become more positive as the black pupil becomes accustomed to the integrated classroom.

It is not possible to obtain self-concept ratings of EMR children integrated into the regular classroom. Further study should explore the effect of separate classroom grouping on the self-concept of the EMR child. The most significant conclusions to be drawn from this study are: 1) achievement in the classroom is not merely a function of intellectual ability but

the result of a complex set of personality dynamics, 2) EMR children have lower self-concepts than children in all groupings except black in newly integrated classrooms, 3) academic achievement and self-concept seem positively related, 4) adequate compensatory education programs need to focus on greater self-awareness as well as increased academic skills for the disadvantaged learner.

References

- Buhler, C. Basic Theoretical Concepts of Humanistic Psychology. American Psychologist, 1971, 26(4), 378-386.
- Coopersmith, Stanley. <u>The Antecedents of Self-Esteem</u>. San Francisco: W. H. Freeman and Company, 1967.
- Cromwell, R. L. A Methodological Approach to Personality Research in Mental Retardation. American Journal of Mental Deficiency. 1959 64, 333-340
- Guthrie, G., Butler, A., & Garlow, L. Patterns of Self-Attitudes of Retardates. American Journal of Mental Deficiency. 1961, 66 222-229.
- Knight, O. Some Problems in Measuring the Self-Concept of the Educable Mentally Retarded. Training School Bulletin, 1970, 66(4), 178-180.
- Mann, P., Beaher, J. & Jacobson, M. The Effect of Group Counseling on Educable Mentally Retarded Boys Self-Concepts. Exceptional Children. 1969, 35(5), 359-366.
- Meyerowitz, J. Self-Derogation in Young Retardates in Special Class Placement. Child Development, 1962, 33, 443-451.
- Ringness, T. Self-Concepts of Children of Low, Average, and High Intelligence. American Journal of Mental Deficiency. 1961, 65, 453-461.
- Weiner, B. Assessment: Beyond Psychometry. American Journal of Mental Deficiency. 1967, 33, 367-370.





Table 2.

Mean Scores of Months Required

to Learn Assigned Music Task

Independent Variables	Group	Means	Significantly Different Groups	
Training				
E ₁ - White keys & trainer singing	1	5.29	5	
E ₂ - White keys & no singing	2	5.23	5	
E ₃ - Varied colored keys & trainer singing	3	4.81	5	
E ₄ - Varied colored keys & no singing	4	5.26	5	
Control group	5	7.00*	1,2,3,4	
Sex				
Male	1	5.76	None	
Female	2	5.28	None	
Ability				
High	1	4.33	2	
Low	2	6.71	1	

^{*}A mean of seven indicates that the subject did not meet criterion during the six months allotted for the study.



There were many gratifying aspects of this 6-month study with severely retarded youngsters, only a minute part of which is clearly indicated by the statistical analysis of results. Many of the staff were skeptical that these subjects could be simulated to respond to anything as meaningful as musical tone and rhythm. It was a learning experience for the professional and para-professional workers to learn that these subjects can maintain an interest in mastering a simple music task. The music lesson became an experience that the subjects anticipated and in which they were motivated to succeed. Contrary to some current opinions that a population so limited in intellectual ability can learn effectively only through operant conditioning "techniques," no such structured reinforcement schedule was used. Subjects were obviously rewarded by interaction with the music trainer whom they respected and by the opportunity to try to create the music they had heard him produce. However, no special effort was made to reward the subject for correct performance. Some of the subjects went ahead to learn other simple tunes and most of them developed considerable interest in music. Their efforts to participate in musical activities provide many hours of meaningful entertainment in an often too routine existence. Daily musical programs remain very important to this group of retarded individuals. The cottage staff who supervised the daily toileting, feeding, and other self-care needs of this group have taken a renewed interest in the learning potential of this group. As might be expected, this higher level of expectation has helped in the development of greater self-care skills.

It is also encouraging to note that the observation of behavior of these individuals by professional staff members can result in valid predictions of their ability to learn. As mentioned previously, the lack of available



7

psychometric instruments to measure adequately the intellectual potential of the severely retarded limits understanding of this group. It seems likely that careful observation by professional workers may be a useful supplement as we continue to gain more valid and reliable psychometric data on this population.

It was interesting to note throughout this experiment that individual response styles to stimulation varied considerably. Some individuals moved quickly to criterion performance whereas others took the full six months to reach that level of achievement and some never succeeded. This study focused on acquisition of a specific skill so it is not possible to report that significant, positive changes in social interaction occurred. Many of the staff expressed a belief that these subjects were more gregarious after some experience with the music training. The impact of learning such a skill can only be hypothesized as producing growth in social awareness until it is investigated empirically.

Caution must be used in generalizing beyond those involved in this study.

It is likely that the retarded individuals of this study are similar to most institutionalized persons classified as severely or profoundly retarded.

However, the music trainer was a very patient professional who believed strongly in the potential of the subjects to succeed. In any event, this study provides additional evidence that the severely retarded are unique individuals with a potential for learning new tasks.

References

- Badt, M. J. Levels of abstraction in vocabulary definitions of mentally retarded school children. American Journal of Mental Deficiency, 1958, 63, 241-246.
- Braginsky, D., & Braginsky, B. M., <u>Hansels and gretels</u>; <u>Studies of children in institutions for the mentally retarded</u>. New York: Holt, Rinehart and Winston, Inc., 1971.
- Coles, R. Breaking through the American stereotypes, <u>Time</u>, February, 14, 1972, p. 36.
- Dingman, H. F. <u>Presidential address for the ninety-second annual meeting</u>
 of the American Association on Mental Deficiency. Boston, Mass.,
 Vol. 73, July, 1968, No. 1, p. 2-4.
- Doolin, H. A. Pitch and duration of tone using notation. A new introduction to music. Park Ridge, Illinois; General Work and Music Company, 1966.
- Eby, J. The value of music in a psychiatric institution. Occupational Therapy and Rehabilitation, 1943, 22, 31-35.
- Fitzpatrick, F. K. The use of rhythm in training severely subnormal patients. American Journal of Mental Deficiency. 1959, 63, 981-987.
- Gaston, E. T. Music in therapy. New York, MacMillan Co., 1968.
- Graham, R. M. The effect of early music deprivation on the musical performance of institutionalized mentally retarded children. In Music in Therapy Ed. by E. Thayer Gaston. New York: The Macmillan Company, 1968.
- Harrison, W., Lecron, H., Timerlin, M. K., & Trausdale, W. W. The effect of music and exercise upon the self-help skills of non-verbal retardates. American Journal of Mental Deficiency, 1966, 71, 279-282.
- Hobb, M. T. A comparison of institutionalized and non-institutionalized mentally retarded. American Journal of Mental Deficiency, 1964, 69, 206-210.



- Hyde, M. Music in American society. <u>Music Educators Journal</u>, 1968, 55, 117-121.
- Isern, B. Summary, conclusions, and implications: The influence of music upon the memory of mentally retarded children. In E. H. Schneider (Ed.), Music Therapy, Lawrence, Kan: Allen Press, 1961.
- Jorgenson, H., & Parnell, M. K. Modifying social behaviors of mentally retarded children in music activities. <u>Journal of Music Therapy</u>, 1970, 7, 83-87.
- Luckey, R. E., Carpenter, C., & Steiner, J. E. Severely retarded adults' response to rhythm band instruments. American Journal of Mental <u>Deficiency</u>, 1967, 71, 616-618.
- Marvin, W. G. Music in American Society. <u>Music Educators Journal</u>, 1968, <u>55</u>, 121-125.
- Rogge, G. C. Music as communication with special reference to its role as content. Unpublished (Doctoral Dissertation, University of California, Los Angeles), 1952. B-54.
- Sarason, S. B., & Gladwin, T. Psychological and cultural problems in mental subnormality: A review of research. American Journal of Mental Deficiency, 1958, 62, 1115-1307.
- Schapiro, E. A technique of using the piano in the rehabilitation of the blind adult. Unpublished (Doctoral Dissertation, Teachers College, Columbia University) 1955. B-21.
- Skeels, H. M. Effects of adoption on children from institutions. Children, 1965, 40, 33-34.
- Weber, E. W. <u>Mentally retarded children and their education</u>. Springfield, Illinois: Charles C. Thomas Publishing Company, 1963.
- Weigel, V. The rhythmic approach in music therapy. In E. H. Schneider, (Ed.) Music Therapy, Lawrence, Kansas: Allen Press, 1962.
- Wiesen, A. A., & Watson, E. Elimination of attention seeking behavior in a retarded child. American Journal of Mental Deficiency, 1967, 1, 50.
- Ziegler, E., Butterfield, E. C., & Goff, G. A measure of preinstitutionalized social deprivation for institutionalized retardates. <u>American</u> <u>Journal of Mental Deficiency</u>, 1966, 70, 873-885.